



Patent Attorney's Docket No.: 42390P12215

Patent

In re the Application of: Parrot
(inventor(s))

**AMENDMENT UNDER
37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2700**

Application No.: 09/385,315

Filed: August 30, 1999

For: Infrared to Radio Frequency Adapter and Method For Using the Same

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ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231
Box AF

NOV 26 2002

Technology Center 2100

SIR: Transmitted herewith is an **Amendment After Final Action** for the above application.

Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.

X No additional fee is required.

 A Notice of Appeal is enclosed.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 21	Minus	** 21	0
Indep. Claims	* 5	Minus	*** 5	0
	First Presentation of Multiple Dependent Claim(s)			

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

SMALL ENTITY

Rate	Additional Fee
X9	\$ 0
X39	\$ 0
+130	\$ 0
Total Add. Fee	\$ 0

**OTHER THAN A
SMALL ENTITY**

Rate	Additional Fee
X18	\$ 0
X78	\$ 0
+260	\$ 0
Total Add. Fee	\$ 0

_____ A check in the amount of \$ _____ is attached for presentation of additional claim(s).

X Applicant(s) hereby Petition(s) for an Extension of Time pursuant to 37 C.F.R. § 1.136(a) should one be necessary.

_____ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

A duplicate copy of this sheet is enclosed.

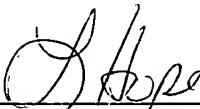
X The Commissioner of Patents and Trademarks is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2666 **(a duplicate copy of this sheet is enclosed):**

X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: November 18, 2002



Libby H. Hope
Reg. No. 46,774

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(303) 740-1980

FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that I am causing the above-referenced correspondence to be deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

Date of Deposit: November 18, 2002

Name of Person Mailing Correspondence: Libby H. Hope

Signature

Date



PTO/SB/17(09-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL FOR FY 2002TOTAL AMOUNT OF PAYMENT (\$) 40.00

Complete if Known:

Application No. 09/385,315Filing Date August 30, 1999First Named Inventor William M. ParrotGroup Art Unit 2152Examiner Name Hunt E.Attorney Docket No. 42.P12215**RECEIVED**

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METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name _____

FIRST CLASS CERTIFICATE OF MAILING
(37 C.F.R. § 1.8 (a))

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17. I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage in an envelope, addressed to the Assistant Commissioner for Patents, Washington, DC 20231.

2. ☒ Payment Enclosed:

☒ Check☐ Money Order☐ OtherOn July 16, 2002
Date of Deposit**FEE CALCULATION****1. BASIC FILING FEE****Large Entity Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	740	201	370
106	330	206	165
107	510	207	255
108	740	208	370
114	160	214	80

Fee Description

Utility application filing fee
Design application filing fee
Plant filing fee
Reissue filing fee
Provisional application filing fee

Fee Paid

SUBTOTAL (1) \$ 0.00

Name of Person Mailing Correspondence

Signature April M. WorleyDate 7/16/02**2. EXTRA CLAIM FEES****Extra Claims**Fee from
below**Fee Paid**

Total Claims _____

- 20** = _____

X _____ = _____

Independent Claims _____

- 3** = _____

X _____ = _____

Multiple Dependent

_____ = _____

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9

Fee Description

Claims in excess of 20
Independent claims in excess of 3
Multiple dependent claim, if not paid
**Reissue independent claims over original patent
**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0.00

Docket No.: 42.P12215

Application No.: 09/385,315

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex-parte reexamination	
099	8,800	099	8,800	Request for inter partes reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	400	216	200	Extension for response within second month	
117	920	217	460	Extension for response within third month	
118	1,440	218	720	Extension for response within fourth month	
128	1,960	228	980	Extension for response within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive unavoidably abandoned application or unavoidably delayed payment of issue fee	
141	1,280	241	640	Petition to revive unintentionally abandoned application or unintentionally delayed payment of issue fee	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	740	246	370	For filing a submission after final rejection (see 37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (see 37 CFR 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					
Other fee (specify) _____					

SUBTOTAL (3) \$ 40.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Mark C. Van NessSignature:  Date: 7/16/02Reg. Number: 39,865 Telephone Number: 303-740-1980



Serial/Patent No.: 09/385,315 Filing/Issue Date: August 30, 1999

Client: Intel Corporation
Title: Infrared to Radio Frequency Adapter and Method
for Using the Same

BSTZ File No.: 342,212,215 Atty/Secy Initials: MCV/KTC/annu
Date Mailed: July 16, 2002 Docket Due Date: MCV/KTC/annu

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|--|--|---|
| <input type="checkbox"/> Amendment/Response (___ pgs.) | <input type="checkbox"/> Express Mail No: ___ | <input checked="" type="checkbox"/> Check No. <u>2000</u> |
| <input type="checkbox"/> Appeal Brief (___ pgs.) (in triplicate) | <input type="checkbox"/> ___ Month(s) Extension of Time | <input type="checkbox"/> Amt: <u>40.-</u> |
| <input type="checkbox"/> Application - Utility (___ pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO 149 (___ pgs.) | <input type="checkbox"/> Check No. ___ |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (___ pgs.) | <input type="checkbox"/> Issue Fee Transmittal | <input type="checkbox"/> Amt: ___ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (___ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (___ pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (___ pgs.) | <input type="checkbox"/> Petition for ___ | |
| <input type="checkbox"/> Application - Design (___ pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (___ pgs.) | <input type="checkbox"/> Power of Attorney (___ pgs.) | |
| <input type="checkbox"/> Application - Provisional (___ pgs.) | <input type="checkbox"/> Preliminary Amendment (___ pgs.) | |
| <input checked="" type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (___ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input type="checkbox"/> Declaration & POA (___ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Data & Copy of Invention Summary | <input type="checkbox"/> Transmittal Letter, in duplicate | |
| <input type="checkbox"/> Drawings: ___ # of sheets includes ___ figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |

☐ Other: _____

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